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Attorneys for Plaintiff

UNITED STATES DISTRICT COURT
 EASTERN DISTRICT OF PENNSYLVANIA

IN RE: ASBESTOS PRODUCTS LIABILITY
 LITIGATION (NO. VI),

Civil Action No. MDL. 875

This document relates to James Guthrie, Tony
 Davidson, Ronald Zerangue, Samuel Rester,
 John Gray, Elmer Parolini, Wayne Dufault, Jesse
 Beverly, Jr. v. General Electric Company, Todd
 Shipyards Corporation, Lockheed Martin
 Corporation, Raytheon Aircraft Company,
 McDonnell Douglas Corporation, United States
 District Court for the Northern District of
 California, Case No.C07-2542-JL , Filed May
 14, 2007.

STATEMENT OF CASE STATUS AS
 TO PLAINTIFF Wayne Dufault

Pursuant to Administrative Order No. 12 of May 31, 2007, the above-referenced plaintiff
 makes the following statements:

1. SUBMISSION OF IDENTIFICATION INFORMATION

Plaintiff (full name): Wayne Dufault;

Date of Birth: June 23, 1949;

Last four digits of plaintiff's social security number: 3526;

Plaintiff is a: asbestos-related injury victim. (The person who suffered the asbestos-
 related injury was Wayne Dufault).

2. SUBMISSION OR RELATED COURT ACTIONS

Plaintiff identifies the following related actions, the status of each of the following being

"pending" in the court unless otherwise indicated; with additional information on these related action(s) attached hereto and incorporated herein by this reference:

Wayne Dufault v. Asbestos Defendants, San Francisco Superior Court of the State of California, Case No. 456493; Claim of the Asbestos Injured Party for his personal injury.

3. SUBMISSION OF STATEMENT OF CASE STATUS

A. Plaintiff identifies the following defendants as non-bankrupt and unsettled the above stated plaintiff has pled against: GENERAL ELECTRIC COMPANY, LOCKHEED MARTIN CORPORATION, TODD SHIPYARDS CORPORATION, MCDONNELL DOUGLAS CORPORATION, GENERAL DYNAMICS CORPORATION

B. Plaintiff has achieved resolution of plaintiff's claim with the following defendants: Not applicable.

C. Plaintiff now desires to dismiss from Plaintiff's action the following Defendants: Not applicable.

D. Plaintiff identifies the following defendant(s) as currently in bankruptcy: Not applicable.

4. SUBMISSION OF MEDICAL REPORTS

Plaintiff submits that attached medical diagnosing report / opinion based upon objective and subjective data which is identified and descriptively set out within the report / opinion which will withstand a dispositive motion, and is based on objective and subjective data which is identified and descriptively set out within the report / opinion.

5. ALTERNATIVE PLAINTIFF SUBMISSION

Not Applicable.

6. TIMING REOUIREMENTS

Above plaintiff's action was filed on May 14, 2007 making this submission due on or before August 1, 2007.

7. SCREENED CASES

Plaintiff's claims are not the result of a mass screening.

1 8. EXCLUSIONS

2 This case is not designated as 2MDL 875 (MARDOC).

3 9. SETTLEMENT CONFERENCE / SUGGESTIONS OF REMAND

4 Plaintiff asks that a settlement conference be set in this matter and seeks remand of this
5 case back to the originating court.

6 10. MANNER OF SUBMISSIONS

7 In accordance with FRCivP Rule 5, a copy of the foregoing submission is served upon all
8 parties in this above-identified action (Case No.C07-2542-JL) pursuant to the local rules of the
9 United States District Court for the Northern District of California, upon filing with that Court,
10 using that Court's transmission facilities by means of the Court's CM/ECF (Case Management /
11 Electronic Case Filing) system.

12 Dated: 7/10/07

BRAYTON ♦ PURCELL LLP

13
14 By: 

David R. Donadio
Attorneys for Plaintiff Wayne Dufault

DEFENDANTS IN RELATED COURT ACTION

ALLIS-CHALMERS CORPORATION PRODUCT LIABILITY TRUST
 CLEAVER-BROOKS, INC.
 BUCYRUS INTERNATIONAL, INC.
 CRANE CO.
 THOMAS DEE ENGINEERING CO., INC.
 DURAMETALLIC CORPORATION
 FOSTER WHEELER LLC
 GARLOCK SEALING TECHNOLOGIES, LLC
 GENERAL MOTORS CORPORATION
 LAMONS GASKET COMPANY
 METALCLAD INSULATION CORPORATION
 OWENS-ILLINOIS, INC.
 PARKER-HANNIFIN CORPORATION
 PLANT INSULATION COMPANY
 QUINTEC INDUSTRIES, INC.
 RAPID-AMERICAN CORPORATION
 R.F. MACDONALD CO.
 THORPE INSULATION COMPANY
 UNIROYAL HOLDING, INC.
 VIACOM, INC.
 WESTERN MacARTHUR COMPANY
 MacARTHUR COMPANY
 WESTERN ASBESTOS COMPANY
 HONEYWELL INTERNATIONAL, INC.
 A.W. CHESTERTON COMPANY
 CSK AUTO, INC.
 BUFFALO PUMPS, INC.
 IMO INDUSTRIES, INC.
 ELLIOTT TURBOMACHINERY CO., INC.
 INGERSOLL-RAND COMPANY
 LESLIE CONTROLS, INC.
 WARREN PUMPS, LLC
 UNITED TECHNOLOGIES CORPORATION
 THE BOEING COMPANY
 HOPEMAN BROTHERS, INC.
 J.T. THORPE & SON, INC.
 METROPOLITAN LIFE INSURANCE COMPANY
 GATKE CORPORATION
 AMERICAN CONFERENCE OF GOVERNMENTAL INDUSTRIAL HYGIENISTS, INC.
 UNDERWRITERS LABORATORIES, INC.
 PNEUMO ABEX LLC
 and DOES 1-8500, AND, GENERAL ELECTRIC COMPANY

Defendants.

Wayne Dufault vs. Asbestos Defendants (B❖P)
 San Francisco Superior Court

East Bay Pulmonary Medical Group Professional Corporation

Herman R. Bruch, M.D.
Richard A. Bordow, M.D.
Frederick J. Nachtwey, M.D.
Abid Majid, M.D.

Pulmonary Medicine
Internal Medicine
Critical Care Medicine
Occupational Lung Diseases
Sleep Medicine

December 5, 2006

Alan R. Brayton, Esq.
Brayton Purcell Law Firm
222 Rush Landing Road
Novato, CA 94948

RE: WAYNE DUFAULT
DOB: 06-23-1949

MEDICAL-LEGAL EVALUATION

Dear Mr. Brayton:

Thank you for allowing me to evaluate Mr. Wayne Dufault. At your request, I performed a complete pulmonary evaluation, including review of medical history, review of occupational history, physical examination, review of pulmonary function studies, and review of a CT scan of the thorax. This was done in my office in San Pablo on October 31, 2006.

CHIEF COMPLAINT AND HISTORY OF PRESENT ILLNESS

The patient states that his health is generally good. He had an on-the-job injury two years ago with an injury to his right rotator cuff and his shoulder. Surgery on the shoulder showed that it could not be effectively repaired and, as a result, he has been disabled since that time. He retired as a machinist. He is currently retraining by studying to become a pharmacy technician. He complains of dyspnea over the last decade. He also complains of waking up with a cough on occasion. He states that he has hay fever, and he has noticed occasional wheezing. He has frequent heartburn about twice a week for which he takes antacids. He is a former smoker, having smoked one-half pack of cigarettes a day for the last 15 years. He stopped four months ago and is currently taking nicotine tablets in an attempt to stay off cigarettes. His only other medication is Vicodin, which he takes on a p.r.n. basis.

MEDICAL-LEGAL EVALUATION

RE: WAYNE DUFAULT

December 5, 2006, Page 2

REVIEW OF SYSTEMS

Review of systems shows no history of hypertension, no diabetes, no stroke, no respiratory infections or pneumonia, and no cardiac history. He has had frequent heartburn; see above. He has no other GI complaints. He had an appendectomy as a child. He had a left tibia fracture in 1977.

MEDICATIONS

His only medication is Vicodin and the nicotine tablets.

PERSONAL/FAMILY HISTORY

His father died at the age of 73 with cancer of the colon. His mother is alive at age 90.

OCCUPATIONAL HISTORY

He grew up in Worcester, Massachusetts and graduated high school in 1967. He went to college for one year. He then joined the U.S. Air Force and served in the U.S. Air Force as an aircraft technician and mechanic from 1969 through 1975.

Following completion of his military service, he became a machinist trainee at Mare Island Naval Shipyard from 1975 through 1979 and, upon graduation, he became a journeyman machinist at the Mare Island Naval Shipyard. Throughout his apprenticeship and throughout his activities as a machinist at the Mare Island Naval Shipyard, he worked inside ships reconstructing various machinery, pumps, and valves, where he was heavily exposed to asbestos, as all the pipes and valves were covered with asbestos. He worked at Mare Island from 1975 through the closure of the shipyard in 1995, and had heavy exposure to asbestos throughout this period.

Following the closure of Mare Island Naval Shipyard, he worked at various machine shops and also in various refineries where he reconstructed pumps and valves, some of which contained asbestos gaskets that had to be cleaned out.

PHYSICAL EXAMINATION

MEDICAL-LEGAL EVALUATION

RE: WAYNE DUFAULT

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Physical examination shows his blood pressure to be 150/90. He is a well-developed, well-nourished man in no distress.

HEENT: Unremarkable. The neck shows no adenopathy. There is no neck vein distension.

Chest: The chest is clear to percussion and auscultation. There are no rales, crackles, or wheezes.

Cardiac: The heart exam shows the first and second heart sounds to be normal. No murmurs or gallops.

Abdomen: The abdomen is soft with no organomegaly.

Extremities: Unremarkable. There is no clubbing.

PULMONARY FUNCTION STUDIES

Pulmonary function studies were done at Doctors Medical Center San Pablo on October 31, 2006.

The vital capacity and total lung capacity are within normal limits. On the forced vital capacity maneuver, there is no evidence of airway obstruction. The pulmonary diffusing capacity is within normal limits. Airway resistance is normal.

CHEST X-RAY

There is a report of a chest x-ray performed on June 8, 2006. This report is produced by Dr. Donald Breyer and is dated June 20, 2006. It is in the form of an ILO-B reading and indicates the presence of S-type small opacities in a profusion ratio of 1/0. There is no evidence of pleural abnormalities.

CT SCAN OF THE THORAX

A noncontrast CT scan of the thorax was done at Doctors Medical Center San Pablo on October 31, 2006. In addition to standard CT windows through the lung and upper abdomen, there are special high-resolution thin windows through various levels of the lung in the prone and supine positions. On the conventional pulmonary windows,

MEDICAL-LEGAL EVALUATION

RE: WAYNE DUFAULT

December 5, 2006, Page 4

there is no significant adenopathy or mass lesions within the mediastinum. The pulmonary windows show no significant lung nodules or pulmonary infiltrates. There are no significant pleural abnormalities. There is some minor pleural thickening in the paravertebral areas. There are no pleural calcifications.

On the high-resolution windows in the nondependent portions of the lung, there is a mild profusion of centrilobular opacities. This study was reviewed by Dr. Donald Breyer in a report dated November 8 2006. His conclusions are: "Parenchymal findings present are compatible with mild interstitial fibrosis. The distribution and appearance are compatible with asbestos related interstitial fibrosis."

SUMMARY & CONCLUSION

This patient has had extensive asbestos exposure throughout his career at the Mare Island Naval Shipyard, where he had heavy asbestos exposure as he was working onboard naval vessels where asbestos was being actively altered. His pulmonary function studies are essentially normal, and I do not believe that he has significant pulmonary disability. His CT scan is suggestive of mild interstitial fibrosis of the lungs.

Pulmonary asbestosis can be progressive with the further passage of time. Additionally, he is at risk for the development of cancer complications that are of increased incidence in patients with asbestos exposure. Additionally, people with asbestos exposure with an additional history of tobacco exposure have a significantly higher incidence of cancer complications than with either asbestos or tobacco exposure alone. Thus, he is at risk for developing cancer of the lungs, pleura, upper airways, gastrointestinal tract, or kidneys. I would recommend regular medical followup to include chest x-rays and pulmonary function studies every two or three years, and a followup CT scan of the thorax every three years, as the CT is more sensitive at detecting asbestos or cancer-related complications. In addition to a conventional CT scan, he should have additional high-resolution thin windows performed through various levels of the lung in the prone position, as this type of study is needed to properly assess for interstitial fibrosis.

MEDICAL-LEGAL EVALUATION
RE: WAYNE DUFAULT
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IMPRESSION

Pulmonary asbestosis with mild interstitial fibrosis of the lungs. Further followup recommended.


HERMAN R. BRUCH, M.D.

HB/mt507/128

DOCTORS MEDICAL CENTER

San Pablo Campus 2000 Vale Road. San Pablo, CA 94806

PT: DFAULT, WAYNE DOB: 06/23/1949

ADM:

ACCT: 000630400024 MR#: 0000000001130616 ROOM:

Herman Bruch, MDx 200610310094093500

AUTH ID: 1060 COSIGN:

OTHER

PULMONARY FUNCTION REPORT

INTERPRETATION:

The vital capacity and total lung capacity are within normal limits. On the forced vital capacity maneuver, there is no evidence of airway obstruction. The pulmonary diffusion capacity is within normal limits. Airway resistance is normal.

IMPRESSION:

Normal pulmonary function study.

H B:Spheris24503

D: 10/31/06 11:47 T: 11/01/06 09:20 DOCUMENT: 200610310094093500

Herman Bruch, MDx

DOCTORS MEDICAL CENTER
San Pablo Campus
2000 Vale Road
San Pablo, CA 94806

PATIENT NAME: DFAULT, WAYNE
PHYSICIAN NAME: Herman Bruch, MDx
DATE OF ADMISSION:
ACCOUNT NUMBER: 000630400024
MRN: 0000000001130616
ROOM:

Date Receive:
M.D. Initial:
Date:

DOCTORS MEDICAL CENTER SAN PABLO
2000 VALE RD
SAN PABLO, CA

Name: Dufault, Wayne	ID: 0630400024	BSA: 2.04	Date: 10/31/2006
Tech: Trewin, Greg, RPFT	Height: 67.50	Age: 57	Room: OP
Doctor: Bruch, Herman	Weight: 202.00	Sex: Male	Race: Caucasian

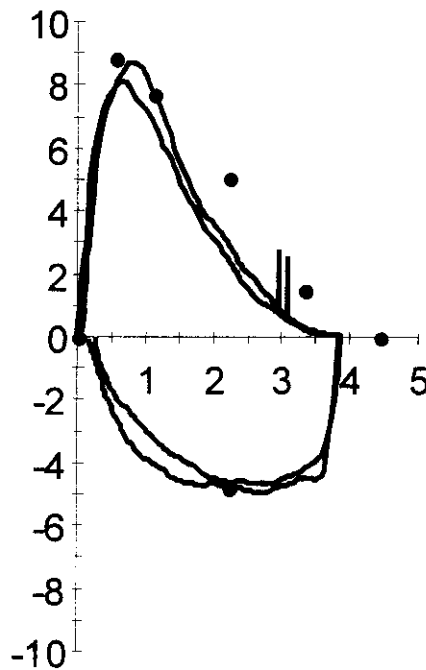
Pre Test Comments:

Post Test Comments: Predicted lung volumes, spirometry, and DLCO are from Crapo, et al, ARRD, Volume 123, pages 650-664 and 185-190, 1981.

	Pre-Bronch			Post-Bronch		
	<u>Pred</u>	<u>Actual</u>	<u>%Pred</u>	<u>Actual</u>	<u>%Pred</u>	<u>%Chng</u>
--- SPIROMETRY ---						
FVC (L)	4.42	3.87	88	3.83	87	-1
FEV1 (L)	3.52	2.96	84	3.10	88	5
FEV1/FVC (%)	80	76	96	81	101	6
FEF 25% (L/sec)	7.69	7.27	95	8.40	109	16
FEF 75% (L/sec)	1.49	0.85	57	1.04	70	21
FEF 25-75% (L/sec)	3.46	2.38	69	2.97	86	25
FEF Max (L/sec)	8.88	8.49	96	8.81	99	4
FIVC (L)		3.70		3.57		-4
FIF Max (L/sec)	3.77	4.68	124	4.93	131	5
--- LUNG VOLUMES ---						
SVC (L)	4.42	3.97	90	3.90	88	-2
IC (L)	3.16	2.74	87	3.00	95	10
ERV (L)	1.26	1.23	98	0.90	71	-27
TGV (L)	3.32	2.79	84			
RV (Pleth) (L)	2.04	1.56	77			
TLC (Pleth) (L)	6.48	5.53	85			
RV/TLC (Pleth) (%)	32	28	88			
Trapped Gas (L)						
--- DIFFUSION ---						
DLCOunc (ml/min/mmHg)	32.50	27.82	86			
DLCOcor (ml/min/mmHg)	32.50	27.98	86			
DL/VA (ml/min/mmHg/L)	5.14	4.97	97			
VA (L)	6.33	5.63	89			
Hgb (gm/dL)	12-18	14.4				
--- AIRWAYS RESISTANCE ---						
Raw (cmH2O/L/s)	1.45	0.52	36			
Gaw (L/s/cmH2O)	1.03	1.94	188			
sRaw (cmH2O*s)	4.76	1.62	34			
sGaw (1/cmH2O*s)	0.20	0.62	310			

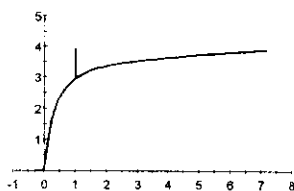
DOCTORS MEDICAL CENTER SAN PABLO
2000 VALE RD
SAN PABLO, CA

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Doctor: Bruch, Herman	Weight: 202.00	Sex: Male	Race: Caucasian

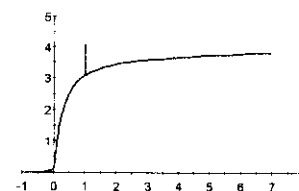


• Pred — Pre - - Post

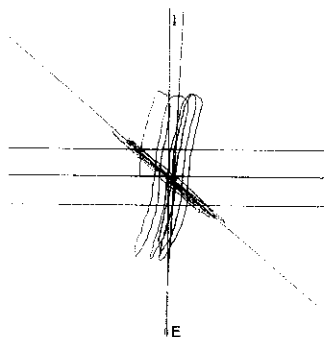
Pre



Post



Pre

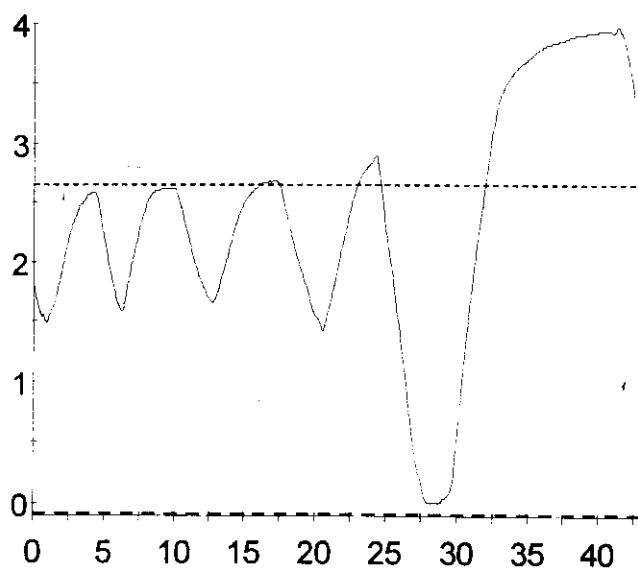


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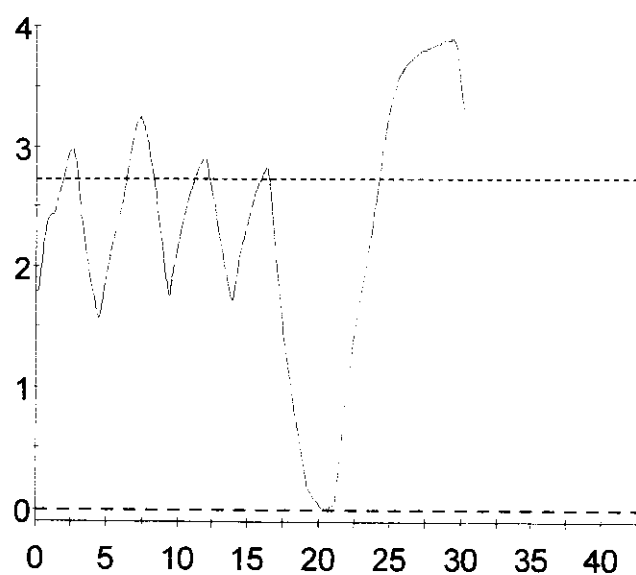
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Doctor: Bruch, Herman	Weight: 202.00	Sex: Male	Race: Caucasian

Time	Select	RpLp	Test Mode	Source	SVC absolute	SVC % p/c	IC absolute	IC % p/c
Predicted					4.42		3.16	
Pre								
09:27:41				SVC	3.71	84	2.65	84
09:29:05	*			SVC	3.97	90	2.74	87
09:30:51				SVC	3.90	88	2.87	91
09:51:14				DLCO	3.73	84	2.64	84
09:58:46				DLCO	3.73	84	2.91	92
AVG			Pre/Baseline		3.97	90	2.74	87
Post								
10:01:32				SVC	3.83	-4	2.80	+2
10:02:28				SVC	3.78	-5	2.72	-1
10:03:18	*			SVC	3.90	-2	3.00	+10
AVG			Post		3.90	-2	3.00	+10

09:29:05



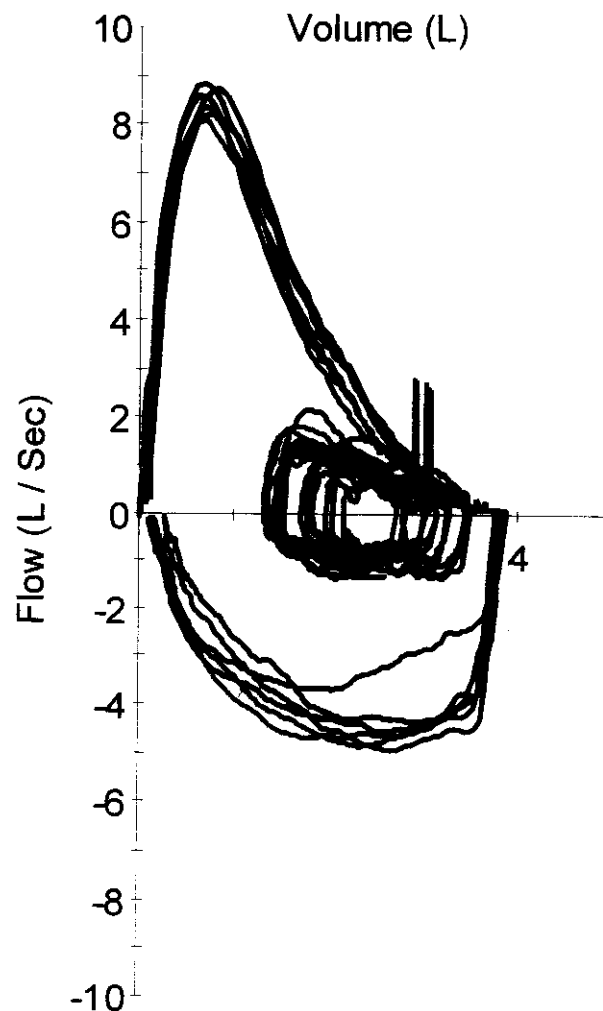
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DOCTORS MEDICAL CENTER SAN PABLO
2000 VALE RD
SAN PABLO, CA

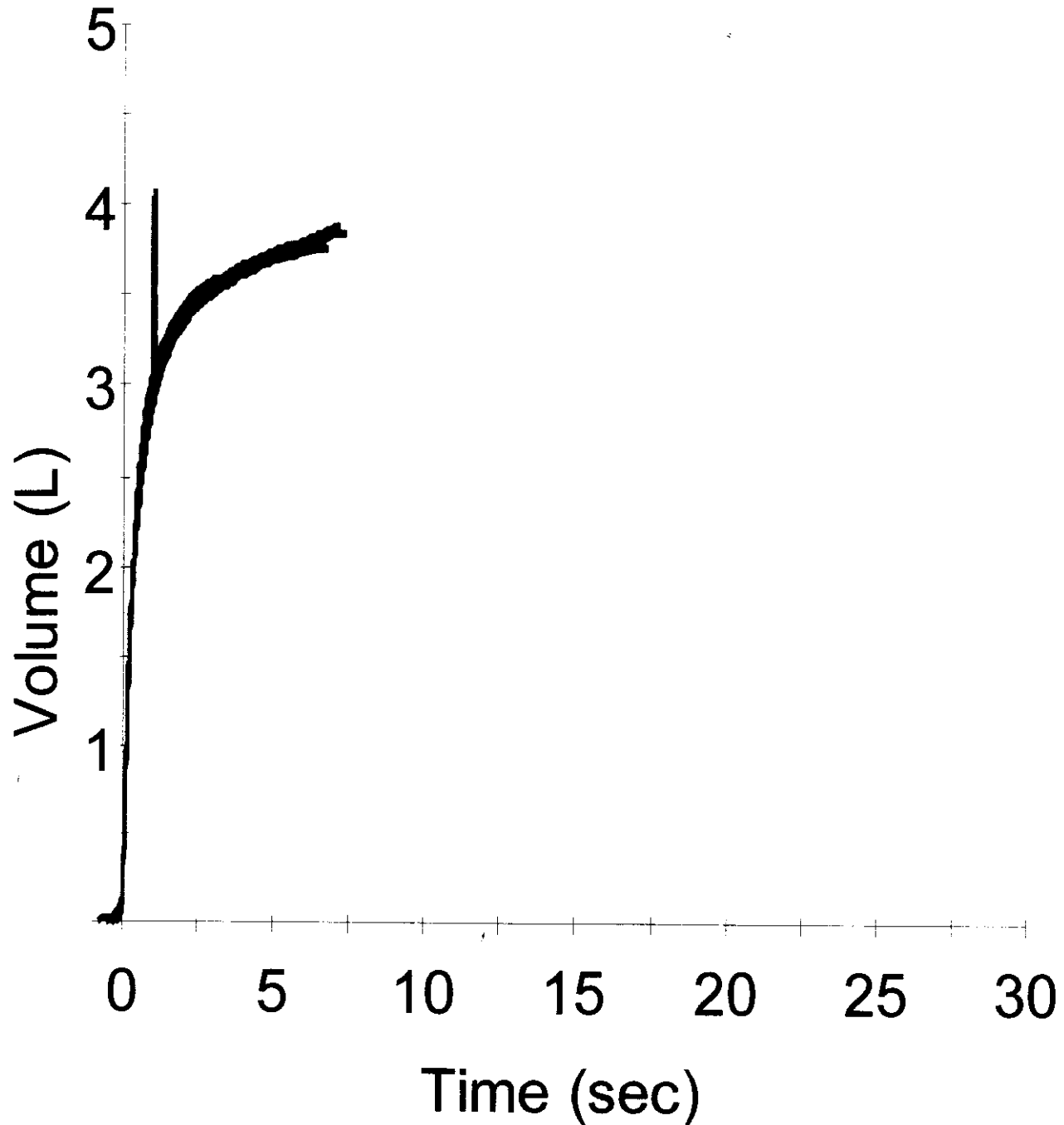
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Tech: Trewin, Greg, RPFT	Height: 67.50	Age: 57	Room: OP
Doctor: Bruch, Herman	Weight: 202.00	Sex: Male	Race: Caucasian

Time	Select	I-Lp	Test Mode	ATS	FVC absolute	FVC % p/c	FEV1 absolute	FEV1 % p/c	FEV1/FVC absolute	FEF 25-75% absolute
Pre										
09:34:49	*				3.87	88	2.96	84	76	2.38
09:32:45	*				3.84	87	2.96	84	77	2.42
09:33:46	*				3.80	86	2.92	83	77	2.34
ATS			Pre/Baseline		3.87	88	2.96	84	76	2.38
Post										
10:04:52	*				3.83	-1	3.10	+5	81	2.97
10:04:01	*				3.83	-1	3.05	+3	79	2.70
10:05:43	*				3.77	-3	3.06	+3	81	2.86
ATS			Post		3.83	-1	3.10	+5	81	2.97



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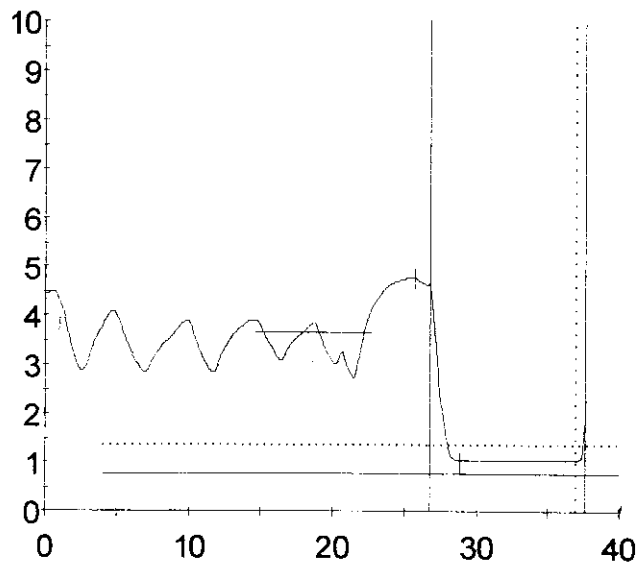


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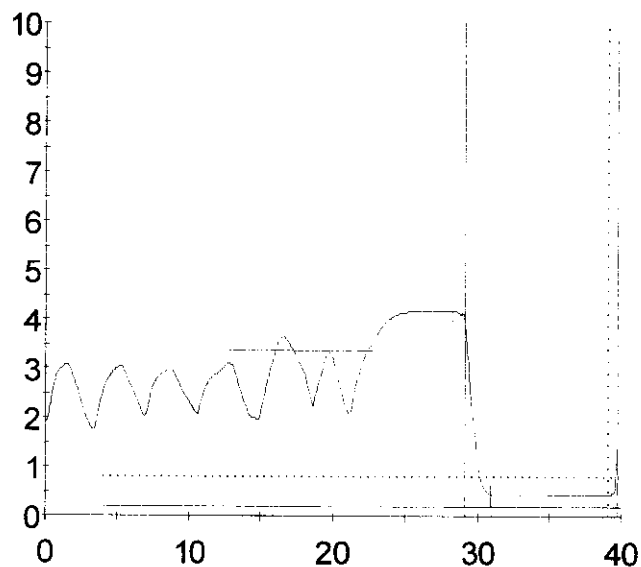
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Time	Select	RpLp	Test Mode	Codes	Protocol	DLCOunc absolute	DLCOunc % p/c	DLCOcor absolute	DLCOcor % p/c	DL/VA absolute
Predicted						32.50		32.50		5.14
Pre										
09:51:14	*				Jones-Mea	26.53	82	26.69	82	4.70
09:58:46	*				Jones-Mea	29.10	90	29.27	90	5.24
AVG			Pre/Baseline			27.82	86	27.98	86	4.97
Post										

09:51:14



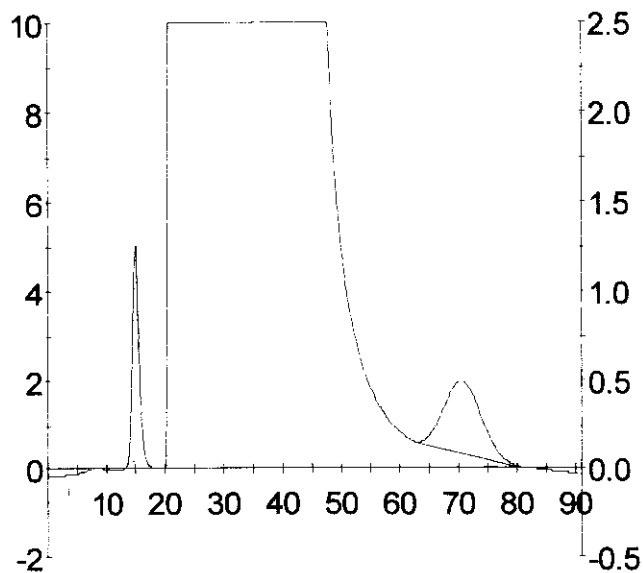
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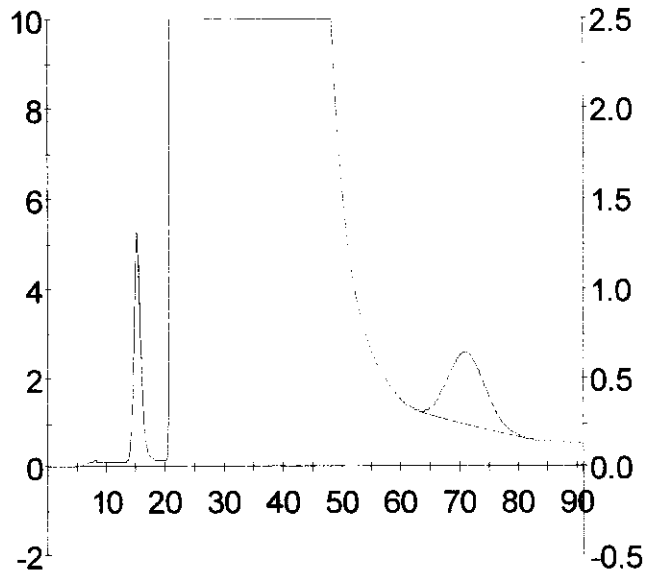
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09:51:14



09:58:46



DONALD BREYER, M.D., F.A.C.R.
Certified ILO B Reader

6861 Gunn Drive
Oakland, CA 94611
(510) 339-9204
Fax: (510) 338-0069

November 8, 2006

DFAULT, WAYNE

EXAMINATION: A CT scan of the chest including conventional and prone high resolution images. The study is performed at Doctors Medical Center of San Pablo on 10/31/06 and is technically adequate.

DATE OF EXAMINATION: October 31, 2006

In the nondependent lung fields on the prone high resolution images there are bilateral changes of an increased profusion of ill defined centrilobular nodular opacities. These are noted on the left side on prone high resolution images #19, #21, and #23. There also appear to be comparable changes on the right side on prone high resolution image #21.

IMPRESSION:

PARENCHYMAL FINDINGS PRESENT ARE COMPATIBLE WITH MILD INTERSTITIAL FIBROSIS. THE DISTRIBUTION AND APPEARANCE ARE COMPATIBLE WITH ASBESTOS RELATED INTERSTITIAL FIBROSIS.



CERTIFICATE OF SERVICE

I am employed in the County of Marin, State of California. I am over the age of 18 years and am not a party to the within action. My business address is 222 Rush Landing Road, P.O. Box 6169, Novato, California, 94948-6169.

On the date indicated below, I served the foregoing Statement of Case Status and attachments upon all counsel of record pursuant to the local rules of the United States District Court for the Northern District of California, upon filing with that Court, using that Court's transmission facilities by means of the Court's CM/ECF (Case Management / Electronic Case Filing) system.

On this ____ day of July 2007

/s/ John Derby

John Derby

BRAYTON♦PURCELL LLP
ATTORNEYS AT LAW
222 RUSH LANDING ROAD
P O BOX 6169
NOVATO, CALIFORNIA 94948-6169
(415) 898-1555